

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS    | ID NO.      | DATE            |
|---------------------------|-------------|-------------|-----------------|
| FEE DETERMINATION         |             |             |                 |
| O.I.P.E. CLASSIFIER       | <i>OPIN</i> | <i>50</i>   | <i>02-24-01</i> |
| FORMALITY REVIEW          | <i>57</i>   | <i>1020</i> | <i>05/01/01</i> |
| RESPONSE FORMALITY REVIEW |             | <i>905</i>  | <i>8/03/01</i>  |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date          |
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| Final Original |               |
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| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

*80501*  
*8/6*  
*8/3/01*